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WHAT IS A NURSE?

By J. F. Botting.

The professional nurse has found her place at last. In fact, she now seems to be everywhere, and opportunity for a little private temperature is denied the citizen in his quiet home, the traveller on train, boat or *street car* (he may kill himself outright undisturbed, but he must not be sick) or even to the soldier on the battlefield. Blessed into existence by the benignant rays of after-glory radiating from Florence Nightingale's early work and established in Canada by the heroic zeal of Jeanne Mance, the nursing profession has been idealized, as a life of self-sacrifice and service. And the "trained nurse" has been wept over, as a heroine, in public and loved and appreciated or feared and disliked in her work, according to her merit or the temperament of the people with whom she comes into contact. Many as are the nurses who have exhausted all their tactful resources in homes of the sick or with the sick in hospitals, trying to meet the needs of complex natures or to gratify the whims of "faddy" ones (if they be such that they may be gratified), or soothing and keeping peace with the irritable or nerve-wrecked, or doing what is often more difficult than any of these things, making her position in the homes of the sick understood, in all these ways proving that the "really, truly" nurse in actual work is not really looked upon as a creature to be praised and loved, alone, she still stands before the world as a "trained nurse"—which means a good deal, much of what it means being very paradoxical. No Philistine has yet arisen that has dared, or perhaps even cared, to attack the nursing profession publicly; nor as a profession, in private.

The "public" softens its voice and lets a misty, brooding, love-light linger in its eye, when it breathes the name of nurse.

To minister with one's hands to another, meeting his physical need, is, of necessity, so intimate, so love-inspired a thing, that the *heart* gets the nurse impression before she is understood or appreciated by any coldly rational judgment of her according to merit. The gentle, dove-like influence of an Evangeline seems the only fitting atmosphere with which to surround a nurse in the abstract. And when the cab stops at the door and the nurse is announced, a too large or too shabby suitcase,

an un-Evangeline hat, a too robust figure, an unmusical voice, eyes that are sharp instead of soft and languishing; any or all of these things are bitterly disappointing to the "family," and if by any sad chance or mischance, the foot should be about number six, the disillusionment is so complete and *so* distressing that the lady doesn't "*feel*" like a "trained nurse" to the disappointed ones till she produces that feeling by her merit—real service in the sick room.

Uniform does a lot, but even uniform cannot quite emancipate from disillusionment, and nursely supremacy in the sick room instead of adding to the nurse-lure only adds to the outrage of her not being the kind of nurse that was expected.

Side by side, with this soft, downy, soulful conception of the nurse is the nurse—a heroine: heroine and ministering spirit as well. And the patient in many instances perhaps scarcely feels that she (perhaps even he) gets seventeen, twenty, twenty-five or thirty dollars a week of real nurse value unless the nurse has passed through a few sieges of tears and blood.

Doubtless any *human* patient would prefer to have as a nurse a dear creature with soft, soothing hands; still those same little hands would feel all the more comforting had they been known to have held back the snakes from an attack upon a poor man in *delirium tremens*, especially if the man were a real, Western cowboy or a blackleg of some degree of depravity, awful enough to make protecting him seem a bit thrilling. What women of his time wouldn't love to have had Rob Roy's nurse (if he had one) if only for the chance of asking her a few questions? Or since our age is not producing many nice, interesting desperadoes, an all-man, part boy, public leader, such as Theodore Roosevelt, the modern American Moses—wouldn't it be interesting to call in his nurse, next morning after she got home from nursing him through an attack of—well, it's hard to say what he'd be sick of—perhaps Democrats, the partified, unhypnotized or unconvinced *remainder*. She might be too tired to work much, but perhaps she could still talk.

This is the romantic conception of nursing that obtains with a great many people.

Often, also, the nurse is looked upon as a sort of domesticated doctor. In vain she protests, "I cannot prescribe remedies or regulate diet, we must ask the doctor about it"; she soon realizes that she is expected to know even a little better than the doctor what to do for the patient, for she is sometimes made the final court of appeal after petitions have been refused in the lower court.

Then, perhaps, the most fatal mistake, so far as the nurse is concerned, is in the notion many people seem to have that the nurse is a sort of machine with unlimited and uninterrupted going and Hercu-

lean lifting power. No one thinks of providing her with rope and pulley, and often no apparatus, human nor mechanical, is provided for her use, when she is ushered into "grandma's" room, where it is explained to her that "poor grandma is quite paralyzed, and that she weighs two hundred and twenty pounds (a mercy if it be not grandpa, who weighs a little more) and, of course, she *would* have her feather bed and she got down into it and got off her pillows, and being so heavy it was impossible to get her up."

Perhaps her daughter "takes after" her mother and has already passed the one hundred and sixtieth mark, while the nurse weighs one hundred and sixteen and a half (to be quite exact), but, then, she's a nurse and she'll know some way of excavating grandma, and be able to do it.

Maybe a hesitating offer of assistance is made, maybe it is thought risky lest it be accepted and grandma is willingly given over to nursey who'll know just what to do with her and will do it—someway. And being a nurse, she will not sleep, of course, when any nursely attention is required by the patient. "What sort of work would that be, 'trained nurses' are too faithful and devoted for that."

Perhaps the patient requires almost constant attention, but "what family in ordinary circumstances can pay two professional nurses to nurse one patient?" But, then, nurse will need to be praised up well if she does all she has to do and sticks to it. Accordingly, at breakfast (for she's always allowed to eat), when the place way in behind her eyes feels as though sawdust had got in through the top of her head, some way, and her ideas are floating together into thickness and her nerves quivering between hysterical laughter or tears, liable to precipitate her into either on the slightest provocation, she is told that it is simply wonderful how nurses get along without sleep, and she's supposed not only to feel flattered but to understand as well that she is not an exception to the rule—*nurses* go without sleep if they have to do so.

Then follows encomiums on the nursing profession, "It is such a noble profession. But"—and the lady, wishing to reserve some claim to fine things for herself, some claim that will bring out a superior quality of soul even to any that the noble nurse has, though the nurse mustn't think she feels that way—probes away into the innermost seat of nursely—shall I say temper and forbearance—by explaining that she never could be a nurse, she simply could not bear to witness the suffering of sick rooms. Perhaps if she be more obtuse than some of her sex, she will explain a little more particularly that she is particularly sympathetic and never could endure seeing others suffer. This may be true in a measure—maybe grandma didn't mind it much being capsized into a feather bed. But it is also true that many women thus grossly insult their nurses and never seem to think anything about it. What

nurse has not been told by a half dozen women or more, during the course of a very serious case, when her sympathies, nerves and strength have all been taxed to their limit of endurance, substantially this: That if she had deeper human sympathies she could not be a nurse, but not having them and being a nurse, she is a dear, noble thing. Strange paradox. So confusion reigns and the nurse to a great many people is a sort of algebraic term, an unknown quantity. She is sweet and soft and noble and devoted and self-sacrificing and ladylike and dignified, yea, *Evangelinic* in "that cute little cap"; but "I don't see how nurses can stand it to see so much suffering and—well, really, they have to do some awful things."

A nurse is a woman. He may be a man, but he doesn't look the part—exactly.

She is a woman with all a true woman's instincts—if she be a nurse worthy the name.

No woman could possibly make an intelligent choice of nursing as a profession, without possessing in a good degree of development the nurse nature found in every true, normal woman. True, some girls choose to train for nurses who do not *choose* nursing *as a profession*, who, in fact, would prefer other work were conditions surrounding that other work as favorable to them as those surrounding nursing. We speak of the nurse who choses nursing as a profession. She is only a human woman and can do only a certain amount of work well without injury to herself and often injustice to her patient. She must sleep, eat and have some recreation and fresh air. She has nerves, a—a—temper, and a limit to her power of keeping it from manifesting itself.

She likes a little sympathy, can be over-dosed and injured by flattery, is the better of encouragement, and should not be asked to carry the woes of too many people at once. Woes, even other people's, have a trick of causing depression and heartache.

She is a disciplined woman, disciplined alike by circumstances and training. I put circumstances first because circumstances do more toward "managing" a nurse than is done by the most rigorous "cut and dried" form of discipline.

The *sane* woman who enters a sick room if only once or twice in a month, *nearly always* knows that it is best to be cheerful, to be quiet, not to be over-emotional, or excited, and to forget herself, even her own heart if need be, in order not to "disturb" the patient. A nurse in her training goes daily, hourly, momently, from one patient to another, any one and all of which it is *best* not to disturb.

A nurse's training is a heart ordeal that none but nurses realize. If she doesn't weep and faint it is not because tears would not often be a great relief, nor because her fortitude is not often tested almost to its point of dissolution. Her very desire to help and satisfaction in

helping are the strongest factors to the force that keeps her calm. She couldn't do much nor do it very quickly, nor well, with her handkerchief at her eyes, and if she turned and fled the sick room to save her own feelings, "where were the 'nursing?' " And what would she feel like in the haven to which she ran even if some head nurse or doctor did not find her, and—and *advise* with her? It is a mistake to say the most sympathetic natures cannot endure the sight of suffering, if while enduring it they can help to relieve that suffering, or even, by their presence, be a comfort to the suffering one. Sympathy does not run away when it is needed, but comes close and yields the utmost and heartiest service. The heart that suffering pierces most deeply, forgets *itself* most completely and devotes itself to service, be it on the rack.

Then a nurse is trained directly to courage and fortitude.

No nurse ever makes a very *triumphal* entrance into the operating room for the first time, and perhaps her first *exit* is decidedly limp and may not even be in an upright position.

But she is sent into the operating room not to be distressed and swoon into the arms of a house-surgeon or across the instrument table as the case may be, and she doesn't do it ninety-nine times out of a hundred perhaps.

We have been thrilled with the masterly description of the way in which a straggling little band of exiled Scotchmen, fighting in the French army against the Germans, took the "Islands of the Scots" and utterly chased their foes.

How they went on foot through the "swoollen" waters of the Rhine River, and overcame almost impossible obstacles because they were animated and stirred to action by their leader calling up remembrances of other heroic battlefields in Scotland. And when the stress was greatest and there was no chance for oratory, they were still spurred on to a last supreme effort by the mention of the name of one of their dead Scotch leaders. Their situation is given to us thus as they were fording the middle stream on foot:

"Have you seen the tall trees swaying,
When the blast is sounding shrill,
And the whirlwind writhes in fury
Up the gorges of the hill?
How they toss their mighty branches,
Struggling with the tempest's shock,
How they keep their place of vantage,
Cleaving firmly to the rock.
Even so these mighty warriors
Held their own against the river,
Though the water splashed about them,

Not an eye was seen to quiver.
Though the shot came sharp and deadly,
Not a man relaxed his hold,
For their hearts were big and thrilling,
With the mighty thoughts of old.
One word was spoke among them,
And through the ranks it spread,
'Remember our dead Claverhouse'
Was all the captain said.
Then sternly bending forward,
They wrestled on a while,
Until they cleared the middle stream,
Then rushed upon the Isle."

If the name of one dead leader made heroes of a whole band of exiled Scotchmen, even without bagpipes, is it to be wondered at that the remembrance of the presence of one *living* woman, somewhere in the hospital, who doesn't faint habitually and doesn't sing lullabies to nervous nurses in their little white beds at night, would *help* to keep a nurse standing on her feet, or whatever the cold, trembly things are she is standing on, even if she turn her head away so as not to see the incision made.

Battlefields may boast their "thin red lines," but there are a few operating rooms where a thin *white* line, a white line feeling tremendously thin in spots, at least, have—well, have done their part, with no mention of it made in the papers.

A nurse is a practical woman. Heroics make good telling. Patient, persevering, sane, intelligent nursing helps to save life and gives comfort to the patient and a heart full of gratification and satisfaction to a nurse, though nothing worthy of limelight be produced. The public attention is very seldom called to nursing except on its heroic side. This and things of like nature foster love of heroics in many a young woman who enters hospital to obtain a nurse's training. Stories are told of slum nursing in which the startling and heroic phases are made to stand out very prominently for reasons not all worthy sometimes. Heroism is a relative term as applied to any nurse.

There are times when any real nurse needs a courage, fortitude and bravery, each of them a pretty good specimen of its kind. If a nurse has these up to the heroic point, she is a heroine, of course. If she has a tide-over allowance she will be in greater danger of heart failure, but will accomplish her work nevertheless. Some nurses enter hospital with dreams of fevered brows soothed to rest under their gentle hands—they find they have to bathe them in ice water till those gentle hands bleed at times—braving scenes of "carnage" in the operating room or draw-

ing back from the very jaws of death—some, perhaps, of the city's great and grand.

Tears, blood, pain and even death itself, may be made to lend a sort of enchantment to the profession, inasmuch as they help the nurse to encompass herself with glory. But a little human contact with the sick, while it may not always overcome the love of heroics, if it ever does, develops in any true nurse the more worthy love of service. And very soon, in the case of most nurses, from the first with others, perhaps, it *feels* surpassingly more satisfactory to her to give a child a nice, warm bath, than it would to be present at an operation where the honored appendix of the Duke of Somebody is removed. A nurse is always altruistic—I still speak of *real* nurses.

The germ of altruism is in the air of a hospital and she "catches" the thing itself if she isn't born with it. And everyone who chooses nursing as a profession is, at least, born "*susceptible.*" Nursing is an education along practical, ethical and altruistic lines. Few nurses have time to remember *all* the family histories of bones and nerves. And materia medica, *too much of it*, might not be good for one's appetite, and a nurse is supposed to avoid, *when possible*, things that injure the health.

She studies some of the wonderful things the doctors know, however, for her essential nurse qualifications necessarily include a great deal of knowledge that her lay sister does not possess.

Then a nurse *develops instincts*, in caring for her patients, that make for character building, besides having ample opportunity even thrust upon her for bringing into use all the good qualities of soul and mind with which she was possessed when she entered hospital.

True altruism demands gratification, and when gratified is its own reward. I think this will be admitted to be a true principle of psychology, though it may never have been stated as a psychological law. Hence nurses serve to gratify their love of service, and are, of necessity, practical women. The last word relative to the nursing profession is —common-sense. The *nurse* in her dealings with her *patient* faces life in its rugged truth phases, shorn of sickly sentiment and false conceptions. Fads, idiosyncracies and nonsense of every kind she looks on with eyes that see. She must, if she would help her patients. And a few years, yes, a few months, of actual nursing puts any woman really worthy of the name of nurse, in a position where she faces physical need in man, woman or child, and undertakes to the extent of her ability to meet that need willingly, unflinchingly, and without reference to, or being influenced by, any other consideration than *that need.* Florence Nightingale is dead; Jeanne Mance is also dead, and precious are their memories. And they "being dead, yet speak," giving direction and stimulus to nursing effort and enterprise. But the *nurse* of to-day and

the nurse of twenty years ago got more from her mother, or some good woman of her progenitors, of those qualities that have made her a successful nurse than she ever got from hospital, text-book or records of noble women. Nurses are born, *then* made.

CHILD WELFARE EXHIBITION.

Truly this is the children's age. Never, I believe, in the world's history has there been so much done for the advancement of the happiness, comfort and health of the little ones as is being done at the present time. I purposely place happiness first, comfort second, and health last, as, given the first two, the last will surely follow, for has any one ever seen an unhappy, uncomfortable, and at the same time, healthy child?

On October 16th I attended the Child Welfare Exhibit in Montreal. Upon entering the large Drill Hall in which this most interesting and instructive exhibition was held, I found myself facing a large grand stand, upon which were seated several hundred little children, who were singing in very good time and tune some kindergarten songs. There were two gymnastic drills given by the children from the Orphan's Home, which would have done credit to older boys and girls.

The Hall was done off in sections, each one being devoted to a different work among children. Domestic science for the girls, manual training for the boys, and work among the blind. The little ones of each class were giving practical demonstrations, and it was wonderful to see what these children had been taught at so early an age. A marvellous sight indeed was that of the blind writing rapidly on their typewriters, or choosing different colored beads for their fancy work.

On the walls were pictures, taken from life, showing the terrible depths of disease and poverty to which one may sink, through filth and shiftlessness—and the contrast is shown by pictures of homes in which cleanliness and industry have been practiced, thereby bringing health and happiness, and, if not wealth, at least the necessities and many of the comforts of life. In many instances, these changes for the better have come through the children having been taught economical and cleanly habits, and awakening an interest in their parents. One three-year-old, upon seeing a model of a yard, "Before and After being raked," was excitedly assuring the on-lookers that she could make her yard "Look like the one that was raked."

The Victorian Order of Nurses did good work in the Exhibit, eight of the nurses being on duty there all the time. One nurse lectured, and demonstrated, to the mothers, upon the care and feeding of infants, and judging from the crowd by which she was continually surrounded there will be many women who will have a better knowledge of how to care

for their children in the future. Other nurses of the Order were assisting at the free dental clinic, where mothers and children were being instructed in the importance of caring for the teeth during childhood.

Perhaps the most "Active" work done by these nurses was that done in the day-nursery, where the babies were cared for while their mothers enjoyed the sights of the Exhibit. Many of the infants, like Rachel mourning for her children, "Refused to be comforted," and a very few slept sweetly.

Much good instruction was given to the grown-ups, by lectures and printed matter, which was either distributed or to be found on screens throughout the Hall.

The effect of this Exhibit, gotten up at the expense of so much time, thought, labor and money, must be far-reaching, and the good and noble work being done among the children of the present day will surely give us better men and women for the future. By educating the little ones in the laws of health, the fathers and mothers of the coming generation will have happier homes, healthier children, and will be more self-dependent than the parents whose children are now being trained in the paths that lead to usefulness and health.

LUCY THOMAS DRAKE.

NURSING IN A MOUNTAIN CAMP.

This summer brought me an experience, rather unique in our profession. I had intended to spend my vacation as last year, mountain climbing with the Alpine Club of Canada at their summer camp—later, resting at the club house in Banff. But the "best laid plans," as usual, went "agley." Accidents will happen in the best regulated families and clubs and, careful as is the Alpine Club, it cannot always escape what at times it, to the uninitiated, may appear to court. On the opening day of camp, one of our more experienced amateur climbers, in bringing his party down Storm Mt., stepped on a loose stone, and had a rather bad tumble. Fortunately he escaped death or permanent injury, but the resulting wounds and bruises, sprains and torn ligaments necessitated a two weeks' sojourn in the Mountain camp. He was very patient and appreciative both of his care and of the fact that my climbing trips were given up. Little did he realize that the prospect of being a "camp-loafer" was not altogether unwelcome. I was not in climbing condition. On my one easy trip, I was mountain-sick nearly all the way up, sprained my knee on the way down, and crawled into camp a veritable wreck.

Camp nursing after the first period of anxiety was over was fun! You may think how horribly inconvenient to care for a helpless human,

back in the mountains, eleven miles from the railway, from which everything had to be carried in on pack-ponies, and a hundred miles from the nearest town. The patient was put in an 8 foot x 10 foot tent on a bed of moss and boughs. Have you any conception of how comfortable such a bed can be? If not, go camping. Clothing had to be literally cut off—my scissors did fell work there. A message was sent to the nearest telegraph office for mattress, pillows, etc., but these things were delayed in transit, and the next day we transferred the patient to an improvised bed made of a framework of poles with canvas stretched over, so arranged that wedges could be driven in to tighten the canvas as it slackened. A mattress was also improvised with sleeping bags, comforters and blankets, and the bed proved so entirely satisfactory that when the real mattress came, it was transferred to my side of the tent, and the nurse enjoyed the one article of luxury in camp.

But the delight of the camp-fire which our more than kind Director kept going all day and half the night! I shall never forget Mr. Wheeler's kindness. His was the first step we heard in the morning and the last at night. The fire was only a few feet from the entrance to the tent, and the camp kettle slung over it ensured a plentiful supply of hot water on demand. A mountain brook—a trout stream—rushed past not twenty feet away, and from its bank close at hand bubbled a spring of coldest, purest mountain water. These are luxuries of untold comfort. I have decided to include them in my list of essentials should I again take to private nursing.

It had its funny side, too! A most unconventional arrangement it was—where the candle was blown out and the patient laboriously turned his face to the wall while I made my final preparations for the night. Our dishes were tin—steel knives and forks. Camp fare was plain but wholesome, and varied with compressed soups of all varieties. Macaroni sticks did duty for drinking tubes. Try them—the added flavor is excellent. (It was a standing joke that these were not wasted, but carefully returned to our good friend and chef, Jim Pong, for further use). Of the fish that were caught, the first were always reserved for our tent, and the patient was not the only one considered. Our vice-president had a secret orange tree from which he succeeded in shaking down one, two, or three a day, as appetite demanded. We strongly suspected that the tree grew many other comforts as well. An improvised cupboard consisting of a small packing box with a shelf inserted, held all sorts of delicacies, including "our poor brother," so that when nourishment time came round, the difficulty lay not in the providing, but in the choosing.

My uniform was unique—climbing boots for wet days, a lighter pair for finer weather. A short skirt and a woollen sweater pulled on over the head completed the costume. These suffered severely as the

days went by, smudges from the camp fire always being held responsible, but laundry bills fretted us not.

At the end of two weeks, the patient was in a condition to be carried on a stretcher to the railway and taken to his home. None too soon, as that evening the weather changed and the rain and snow which accompanied the change would have seriously interfered with our trip to civilization, and scarcely less with our comfort, had we been compelled to remain in camp. Even this trip had its unusual elements, a most exhilarating gallop to Castle on a trusty mountain pony, and a ride to town in the baggage car. Conclusive evidence that we had returned to the haunts of mankind was amply furnished by the ever-growing mob of small boys springing up from the apparently deserted platform as we made our way to the ambulance. E. McP.

LADY DOCTORS FOR INDIA.

It was more than a quarter of a century since the Dowager Marchioness of Dufferin inaugurated the association for supplying female medical aid to the women of India. The twenty-seventh annual report relating to the year 1911, shows that steady progress in the work has been maintained; 310,717 women have been treated in hospitals mainly controlled and supported by the Dufferin Fund, and 397,109 in hospitals supported by other sources, but assisted by the fund. In addition to this work, the Association is supporting to a greater or less extent ninety female students of medicine in various medical schools and colleges throughout the country. It is stated that there are now fifty-six medical women of the first grade practising in India, ninety-two female assistant surgeons, and 342 female hospital assistants; while 586 women are at the present time studying medicine or undergoing training for the nursing profession in various colleges, schools, and hospitals in the different provinces.

Commenting on the report, the "Lancet" says: "There are many difficulties in the way of the complete independence of a woman's medical service in India, and although there is no doubt that the whole trend of informal opinion, official as well as non-official, is in the direction of giving considerably increased power and responsibility to the medical women, this extension and enlargement must take place gradually, if it is to be permanent and beneficial. At the present time the condition of thousands of purdah women, debarred by their religious belief from obtaining male medical treatment, and so far with no female medical aid available, is deplorable. Nothing can alleviate their misery but a greatly increased provision of women doctors, a measure already delayed too long.

CORRESPONDENCE.

SEOUL, CHOSEN, JAPAN, August 19, 1912.

To The Editor of "The Canadian Nurse":

Dear Editor,—When I came out here last year everything was so novel and strange that I decided I would write a letter to "The Canadian Nurse" so that nurses at home might know just what kind of a life was led by a nurse on the foreign mission field. Shall I tell you a little about my daily round? It is much the same as in a hospital at home. The nurses come on duty at seven, have chapel rounds at nine, then dressings and ward work until twelve, the hour for tiffin (we don't say lunch in the Orient), operations in the afternoons, all kinds, for there is the greatest variety of cases, then the day nurses go off duty at seven. I came out just about a year ago, and the first thing I had to do was to study the language. I used to spend six hours daily in straight language study with my teacher, then I went out and practiced what I learned on the patients and nurses. When I had been here about three weeks Miss Shields, the General Superintendent, went off for a much needed vacation. I was very enthusiastic, assured her that I would soon make them understand and urged her to go. But alas! It was no fun to make inspection rounds, to take a dictionary and hunt up a conversation word for word. For example, to a nurse:—"Your—cap—is—on—the—side," or to the cook:—"Buy—one—chicken—12—eggs—1 pound—butter," etc., then when you finished hunting up the last words you found that they had forgotten the first of your sentence. At the end of six months Miss Shields was so tired that I had to take entire charge of the training school. I had a head nurse who understood English very well and she was a great comfort to me—interpreted my lessons to the nurses and their answers to me. Her name is Miss Bessie C. Kim, a very talented woman and skilful nurse (a graduate). We have eight nurses in training—six probationers, a graduate nurse (Korean) in charge of the operating room, and another Graduate doing private ward duty but who is to be the nurse in charge of our new Dispensary, and the Head Nurse whom I already mentioned. The probationers are nice bright girls, very eager to learn and all deeply interested in hearing about the profession in other lands. We don't take in girls now who haven't been to school. Some of them are High School girls and school teachers.

When Miss Shields started the Training School she could get nobody but widows, and not one of them had had any education. (Schools were just starting then.) So she had first to teach them to read and write in their own language, and teach them the rudiments of cleanli-

ness, according to our standards, before she could let them do anything for the patients. It must have been hard, uphill work. It is even yet, but when one remembers the pioneers one realizes how much more difficult their task was. We have a large foreign population here, this being the capital, all nationalities, English, American, French, German, Russian, Italian, Spanish, Chinese and, of course, Japanese, because Korea is now part of the Japanese Empire.

A funny incident occurred the other day. I'll tell you just to show you how varied our experiences are. A person coming out here ought to know all languages under the sun. One night Dr. Hirst telephoned the Hospital to tell me that he was at the Russian Consulate and was sending in a typhoid fever patient (Russian) the next morning, and asked me to have a private ward ready for him. At 7.30 a.m. a Russian arrived in a jirrikisha. As he seemed to be in great distress and was wringing his hands, moaning and rolling his eyes wildly, I had them carry him upstairs very carefully, take off his clothes, sponge him off and apply cold to his head. I had first telephoned and told the Doctor his patient had arrived and seemed to be in a state of great excitement. When the Doctor came he said, "Why, who have you got here?" He was the wrong Russian. This man's lady love and he had disagreed and he hadn't slept for some time. He was in hysterics and had come to get a sedative. As we don't have Russians coming in very often, I had concluded he was the typhoid patient and had him put to bed—and he didn't want to go, either. Poor man, he didn't speak a word of English, French nor Korean, and he had no way of letting us know what was the matter until the other Russian came along in about an hour after and interpreted for him.

We have some very terrible Korean cases. So many keep putting off coming to the doctor until it is too late. It is very piteous to hear them beg and pray to be taken in to be cured. They have the greatest faith in the foreign "ouinan" (doctor) and can't believe that they ever fail to cure. A little while ago a widow brought in her only son who was having hœmorrhages from his lungs and was in the last stages of tuberculosis. We can't take in patients with pulmonary tuberculosis as a rule, but his case was so urgent and he was a private patient and had a ward to himself, so we took him in until the hœmorrhage was controlled. He was a young lawyer, just graduated from the Imperial University, Tokio, one year before, and had come home to start practicing. His people had once been very wealthy and belonged to the nobility, but they had lost all and only had enough to educate him and start him in practice. When the doctor told his old mother that nothing could be done she couldn't and wouldn't believe it. She said she had heard that the Christian's God was very powerful and she used to ask me each time I went into the ward. "Do you think your God is strong

enough to restore my son?" It was very sad. So I assured her He would and she went home saying she would keep on praying. She was a heathen. The last time I heard of them the son was still alive. We told them to keep the windows open and to feed him up. Another case, a woman of 33, came in who complained of terrible pain during her menstrual periods. When the doctor examined her he found that the cervix was almost closed. It seems she was a victim of old-time ignorance. She had prolapse of the uterus and their method of treatment is to put the uterus back in place, pack the vagina with cotton, soaked in oil, and set fire to it. While it burned the woman was held. The scars and adhesions which resulted, kept the uterus up.

I have seen several cases of leperosy. It is quite interesting to realize that one can dress the sores of a leper with impunity, if one has no cuts on her hands or wears rubber gloves. It really isn't any more dreadful than a great many other things. I saw one case of Asiatic cholera. We have a great many cases of dysentry, typhus fever, Beriberi, and a malady known as "togil" (Endenic Hœmaptysis) a disease which is almost peculiar to the Orient and is caused by a fluke in the lung. There is very little smallpox now. The Japanese health regulations are very strict and a great many of these maladies have almost disappeared. There is very little cholera and typhoid compared to what there was before the Japanese enforced cleanliness—and they also have compulsory vaccination. Dr. O. R. Avison, who is a Torontonian, is at the head of the Severance Hospital and Medical College, and has built up a splendid work.

Some of the old-time native remedies would be awfully funny if one didn't remember that there was a pathetic side. For example, tiger's teeth and bones is a famous tonic, the patient is supposed to have the strength of that animal after a course of horangie jak ("horangie," tiger, and "jak," medicine). A favorite remedy for rheumatism and also for pain in the stomach or abdomen is dog soup. The dog is killed and made into soup. The physiological effect on the system is this—the dog enters the remotest joint or crevice of the intestines and attacks and kills the rats which are gnawing the flesh of the patient, and, of course, the patient gets better. "What else can happen," says the old grannie who brews the "jak," "since the rats are dead?" Another dreadful method of treatment is the use of "chims," long blunt needles which are dug into the victim's body to let out the evil spirit which causes the pain. Oftentimes the results of this treatment are disasterous. We have had people come in awful conditions—caused by these "chims."

One's life isn't all hardship in the Orient. This is the capital and the society is varied and interesting. At an afternoon reception one often hears four languages being spoken in different corners of the room—English, French, German and Russian. We have good times,

too. Last winter the Han River, which is a quarter of a mile wide, was frozen solid from Christmas until the middle of February, so we had lots of skating. In the spring and autumn we have tennis and mountain climbing. We have very beautiful mountains all around Seoul. In the summer we can take the street car to the river, for we actually have street cars, electric street cars, and they run with a regularity that might make Mr. Fleming blush. The Hospital has electric lights, hot and cold water, porcelain baths, steam heating, local and long distance telephone. I heard a funny story the other day. It is true, too. A countryman came to Seoul and his heart and soul were filled with wonder over the things he saw. He went back to his country village and told incredulous neighbors that in Seoul they had big wagons driven by thunder and lightning where the people sat in and were driven from one end of the city to the other for 1½ sen. Also, he said the strangest thing of all, he had seen men going like the wind, on large spectacles. The wagons were street cars and the spectacles—have you guessed it?—were bicycles. The shops here are a never failing source of entertainment—old, old brasses and curios and dainty Japanese fabrics.

Here is an incident which may interest nurses. A woman brought in a child who had been having convulsions and the doctors, for a while, weren't sure whether or not she had an abscess or a tumor of the brain. As I had never demonstrated "mustard baths" to my junior nurses I asked the doctor if I might give this child one the next time it had a convulsion in order to impress the lesson of the week before. He said it might soothe the child a little, so I gave her one. It was very singular, but it just happened that she didn't have another convulsion after the tub and seemed much quieter and went to sleep. I was rather taken aback, however, on going into the ward about three hours after to have the mother go right down on her knees and touch her brow on the ground three times and hear her ask the gods to send blessings on my head because I had chased the devil out of her daughter. She thought the mustard bath was a religious rite. The doctor operated and found pus. There is a case on record at Severance Hospital which will sound unbelievable. A woman was in labor for a whole month before they brought her to the Hospital. I myself saw one where the labor had lasted twenty days. They brought her ninety-five miles overland in a chair. She lived, too. It is most wonderful how quickly they pick up. Things which would kill an Occidental woman hardly affect the Oriental.

I remain, sincerely yours,

HELEN FORSYTH.

New York, October 22nd, 1912.

Dear Editor:—

I shall be indebted to you if you will give me a little space for bringing to your readers' attention the forthcoming final volume of "A History of Nursing." Instead of a third volume, there are two, third and fourth, bringing the details of nursing advance closely up to date.

What I wish to impress on your readers' minds is that these two last volumes have been given to the International Council of Nurses and are to be sold for the benefit of its treasury. All royalties from their sale will go to aid that treasury. Another thing important to remember is that the last two volumes may be bought separately from the first.

The price of the two final volumes is the same as that of the others, five dollars (£1), and as this is beyond the means of many individuals, I make the following suggestions:

Let all hospitals and training schools be asked and urged to buy the history for their libraries. All the nurses' clubs and homes should do the same. Then, training school directors might be persuaded to give their most meritorious pupils copies of it as a prize or reward when they receive their certificates. Medical, as well as general, libraries also should possess it. If all these methods of pushing the sale of the third and fourth volumes were followed, especially in English-speaking countries, and if every year those nurses who are able to do so, would buy it, we should in time have a very fair income for our international treasury, which would enable us to maintain a paid secretary and to carry on international work more regularly and effectively than we can do now when all such work is volunteer, unpaid labor.

Another thing I will ask nurses to do is to have copies of the volumes of the History at all large meetings, so that it may be seen and thus advertised. This is an easy thing to do, and is useful.

The History will be procurable from all booksellers, or the publishers, G. P. Putnam's Sons, London and New York.

Lavinia L. Dock,
Honorary Secretary, International Council of Nurses.

GRADUATE NURSES' ASSOCIATION OF NOVA SCOTIA.

The Fourth Annual Meeting of this Association, held on September 4th, at the Nurses' Home of the Victoria General Hospital, Halifax, was largely attended.

The meeting opened with prayer by the Rev. V. E. Harris, an earnest invocation for continued blessing and prosperity.

Roll call, 114 members.

Reports from the Treasurer—Expenditure, $26.93; bank balance, $171.34.

The Registrar—316 calls on the Registry; Nurses' applications to register, 60; Private Nurses registered, 56.

Comprehensive reports on the year's work and on the establishment and scheme of administration of the Benefit Fund for Sick Nurses were submitted by the Secretary.

Subjects presented were:

I. State Registration in Canada.—Introduced by the President and followed by a report of progress made in the various Provinces, kindly contributed by Miss McKenzie, of Ottawa, whose several addresses have already proved so helpful to organization in Nova Scotia.

II. Nursing of Tuberculous Patients.—Dr. Miller, Superintendent of the Kentville Sanitarium, N.S., delivered a most interesting and much appreciated address, dealing with the nursing of tuberculosis in the sanitarium, in the hospital and in the home (district nursing). Statistics proved, said Dr. Miller, in reply to a question, that the sanitarium nurse showed no more liability to contract the disease than the nurse in general training, evidence, in fact, was rather to the contrary.

III. The Nurse in Private Work.—This address was delivered by Dr. Weatherbe, of Halifax, who paid a high tribute to the efficiency and the various qualifications of character and education for the success of the Private Nurse.

A vote of thanks to the speakers, to the Rev. Mr. Harris, and to the officers of the Association was proposed by Miss F. Fraser, R.N., seconded by Mrs. W. D. Forrest.

Officers elected were: Hon. President, Mrs. W. D. Forrest; President, Miss Pemberton; Local Vice-President, Miss F. Fraser, R.N.; Secretary, Miss Kirke; Treasurer, Miss McKiel.

Provincial Vice-Presidents—Miss Sheraton, Superintendent Aberdeen Hospital, New Glasgow; Miss Simpson, Superintendent of Nurses, Nova Scotia Hospital, Dartmouth; Miss Kirkpatrick, Truro General Hospital.

Directors of the Benefit Fund elected were: Miss Kirke, Superintendent of Nurses, Victoria General Hospital, Halifax; Miss Sheraton, Superintendent Aberdeen Hospital, New Glasgow; Miss McKeil, Restholm, Halifax; Miss D. Mullaney, Private Nurse, Halifax.

Trustees—Mr. Chas. Archibald, Halifax; Col. B. A. Weston, Halifax; Dr. G. M. Campbell, Halifax.

Provisional Board of Examiners Re-appointed—Mrs. W. D. Forrest, Hon. President, U.S.G.N.A.; Miss Pope, R.R.C., Superintendent of Nursing Sisters, Halifax; Miss Fraser, R.N., Superintendent Halifax Children's Hospital.

Medical Examiners, elected by the Association—Dr. M. A. Curry,

Halifax; Elected by the Medical Society—Dr. Kimble McKenzie, Halifax.

The meeting concluded with the National Anthem sung by the nurses.

THE SCHOOL NURSE.

The Canadian Public School Nurses' Association held its regular monthly meeting at the Graduate Nurses' Club, Sherbourne street, Toronto, on Monday, November 4th. After the usual business, Dr. Adam Wright gave a most interesting talk on "Public Health," dwelling particularly on contagion from flies, dust and mosquitoes. The appreciation of the nurses was shown Dr. Wright by a standing vote of thanks.

A number of the Nurses belonging to the Public School Staff of Toronto entertained their friends at the Club House, Sherbourne street, on Hallowe'en. A most enjoyable evening was spent, due regard being shown the evening, both in the amusements and the decorations.

There have been several changes on the staff of the Toronto Public School Nurses this past month. Miss Sarah Brick has resigned, owing to ill-health. The teachers of Park School showed their appreciation of Miss Brick's work by giving her a tea, at which they presented her with a pearl pin.

Miss Minnie Van Every has resigned to be married. Miss Britnell takes Miss Brick's place, and Miss Kathleen Panton Miss Van Every's.

Niagara Falls, Ont.—The work is progressing slowly, but surely. There are 1,140 children in the schools. Five schools are equipped with a card system, paper towels and a good supply of drugs. Arrangements are being made to have a dental chair in one of the school offices where the poor children may be treated. We hope soon to have a dispensary at the General Hospital.

An order has been passed at Washington, effective immediately, abolishing the public drinking cup from railroad cars, vessels and other conveyances operating in interstate traffic and from depots and waiting rooms of common carriers. This is the direct result of an investigation by the United States Public Health Service.

New Zealand, by the Mental Defectives' Act, has made provision for the permanent care and control of the feeble-minded.

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Editorial

THE RIGHT TRAINING SCHOOL.

So often nurses who have been trained in a small private or special hospital come seeking recognition by the profession, and only when this is denied do they realize that their training has been inferior and that, after all, they cannot claim first rank. The pity is that *after* the two or three years' hard work is over these young women realize they have no professional standing, and realize, too, that it is reasonable that this should be denied them.

Should this state of affairs be allowed to continue? Can Graduate Nurses' Associations not do something towards placing information within the reach of young women who desire to study nursing that shall enable them to make wise choice of a training school? Can the Canadian National Association of Trained Nurses not do something along this line that will be really helpful?

Of course some may say that these young women should bestow more thought on the subject before any decision is made, should use their common sense in selecting a training school. A young man who specialized in some branch of medicine (if that were possible) and then sought to be recognized by the medical profession as a doctor in good standing would not be considered sane. Yet young women repeatedly do this very thing and then are disappointed when the nursing professions refuses to grant them recognition.

What constitutes a thorough training, and will I be properly fitted to take up the great and noble work of nursing if I train in this school, are questions which should be carefully pondered.

Something will surely be done to help these young women, something must be done. What will it be?

A STEP FORWARD.

The Pacific Coast Journal of Nursing for November tells of the splendid progressive work done by the Superintendents' Society of the State of Washington. To better prepare young women to take up the study of nursing is one of the aims of this Society. This journal says:

"The Hospital Superintendents' Society of the State of Washington is laying foundations for high school preparatory study for nurses that bids fair to do the organization great credit and offer to the established training schools of the State young women who on entering the hospitals will be at once receptive and of value to the school."

"Mrs. Agnes R. Fletcher, Superintendent of the Tacoma Conta-

gious Hospital, has been appointed by the society to act with the City School Superintendent in preparing for this new work, and the society will arrange a curriculum at its November meeting. The high schools of Seattle, Everett and Bellingham have agreed to follow the plans mapped out by the State Superintendents' Society. This is indeed welcome tidings to convey to the nurse educators of these United States. We are proud of those progressive superintendents in Washington and grateful to the public school authorities for recognizing and acceding to this new demand for public school education."

A FLORENCE NIGHTINGALE MEMORIAL.

What form a suitable memorial to Florence Nightingale, the Foundress of Nursing, should take has for some time been a subject for discussion among nurses. One that would be educational in its nature and would be helpful to nurses who sought better educational advantages has always been favored.

The proposal made at the Congress at Cologne by Mrs. Bedford Fenwick will meet with generous approval from nurses everywhere. What could be so fitting as an international memorial that provides educational advantages for the very women in whom Florence Nightingale was always so keenly interested and for whose welfare she planned and worked indefatigably.

The American Journal of Nursing, speaking editorially of this proposal, says:

"A proposal that may have far-reaching influence was that made at the Congress in Cologne to found an international memorial to Miss Nightingale and to make this memorial an educational opportunity for nurses, such as that founded here by the American Nurses' Association in honor of Mrs. Robb and that undertaken by the League of St. Bartholomew's nurses in memory of Miss Stewart. To us it seems that no other memorial is so fitting and expressive, coming from nurses to honor their great leader, as one of a living character, founded on educational lines, which makes it possible for oncoming women to gain the best in professional knowledge and wide culture, and to perfect themselves in advanced or special spheres of work. Miss Nightingale was prepared for her life work by an unusually liberal and scholarly culture, by a rich knowledge of the world, by knowledge of foreign languages, by wide reading. Upon this foundation she built her years of study of hospital and nursing conditions. With her, truly, knowledge was power, and it must be equally so with the great nurses of the future. We have seen in this country that fast multiplying demands for nurses for new lines of work have necessitated educational facilities on new lines to fit them for these calls. Other countries are having a similar experience. Germany

promises to be the next in line with special opportunities for nurses' education on advanced lines of work, with the expected early development of courses in pedagogy, administrative nursing work, and social service in the *Frauen-Hochschule* in Leipsic. Here, it is intended to open such a door as we have at Teachers' College.

"The plan for an international memorial, as presented by Mrs. Fenwick, would be to found a chair of nursing in connection with some educational institution in London, a scheme so in harmony with the genius of Miss Nightingale that it should be carried to triumphant completeness."

The Report of the Cologne Congress, which has appeared in the two previous issues and which we were permitted to copy direct from *The British Journal of Nursing*, the official organ of the International Council of Nurses, by the courtesy of the Editor, will have given our readers a very clear idea of the many important subjects that received attention at that notable Congress.

Have you any opinions to express or particular lessons you wish to emphasize? If so, we shall be pleased to hear from you.

TUBERCULOSIS DAY.

Sixty thousand churches in the United States observed October 27th as tuberculosis day. Organizations which are fighting the tuberculosis plague selected this particular day as one on which special efforts should be made to arouse public interest in the prevention of the disease. Prominent clergymen in nearly every large city of the country have agreed to bring to the attention of their congregations the question of prevention of consumption and to suggest ways and means by which church-goers may co-operate in the national campaign against the scourge. In this year's observance of the day it was planned that emphasis be laid upon the growing evil of the use of fraudulent remedies for the cure of tuberculosis.

My Scallop Shell of Quiet

THE BEATITUDES.

"If we estimate character more by the standard of Christ's Beatitudes than what we short-sightedly call 'results,' we shall find some of the sublimest fruits of faith among what are commonly called passive virtues:—

"In the silent endurance that hides under the shadow of great affliction; in the great loveliness of that forbearance which 'suffers long and is kind'; in the charity which is not easily provoked; in the foregiveness which can be buffeted for doing well and take it patiently; in the smile upon the face of diseased and suffering persons, a transfiguration of the tortured features of pain brightening sick rooms more than the sun; in the unostentatious heroisms of the household amid the daily dripping of small cares; in the noiseless conquests of a love too reverential to complain; in the resting on the Lord and waiting patiently for Him."—Bishop Huntington.

LOST OPPORTUNITIES.

When the last hour of youth is gone, with its opportunities for preparation neglected and unimproved, there is nothing that can be done to repair the harm. "Some things God gives often." The seasons return again and again, and the flowers change with the months; but youth comes twice to none. Thus each period of life has its own closing, its last hour, in which work is ended, whether well done or neglected. Indeed, we may say the same of each day; its end is the closing of a definite season through which we can never pass again. We may think of each single day as a miniature life. It comes to us new; it goes from us finished. There are three hundred and sixty-five days in a year. The only way to have a well-finished year is to finish the tasks and duties of each day as it passes. A marred or a lost day anywhere along the years may lead to loss or even some sore misfortune afterwards. —*Catholic Register.*

The Guild of Saint Barnabas

CANADIAN DISTRICT

MONTREAL—St. John Evangelist, first Tuesday Holy Communion at M. G. H., 6 15 a.m. Second Tuesday, Guild Service or Social Meeting, 4 p.m. Third Tuesday, Guild Service at St. John's, 8.15 p.m. Last Tuesday Holy Communion at R. V. H., 6.15 a.m.
District Chaplain—Rev. Arthur French, 158 Mance Street.
District Superior—Miss Stikeman, 216 Drummond Street.
District Secretary—Miss M. Young, 36 Sherbrooke Street.
District Treasurer—Miss F. M. Shaw, 21 Sherbrooke Street.

"There are other qualities necessary for the really good nurse. For us (doctors), and for you alike, they are the same: quick, unobtrusive sympathy, unwearying kindliness and patience, cheery self-forgetfulness and ingenuity of thoughtfulness. The business of our lives is just this: To be to every individual sufferer under our care all that we can be; to do all, even the very least, that can be done, and to do it in the simplest, kindliest way. It is to catch the spirit of the Good Physician, and to live amongst the sick "as He that serveth." It is yours to be, in literal truth, the servants of the sick, and in the simple performance of your daily duty to reveal to men, it may be, something of the patient tenderness, the willing self-effacement, the loving kindliness of Christ.

'For see: Himself conceived of Life as Love

. . . . . .

Our Life with all it yields of joy and woe
And Hope and fear. . . . .
Is just our chance o' the prize of learning Love.' "

The author of this quotation—Dr. Oswald Browne—took a keen and active interest in the Guild of St. Barnabas, and, until his death in 1908, was found on the platform of the Holborn Town Hall every year at the Annual Festival, where his speech was always looked forward to as one of the most welcome features of the evening. It was through his zeal that the Students' division of the Guild was started and maintained.

THE GRADUATE NURSES' ASSOCIATION OF ONTARIO.

(Incorporated 1908)

President, Miss Bella Crosby, 41 Rose Avenue, Toronto; First Vice-President, Mrs. Tilley, 82 Roxborough Street W., Toronto; Second Vice-President, Miss G. A. Read, 772 Hellmuth Avenue, London; Recording Secretary, Miss Ina F. Pringle, 188 Avenue Road, Toronto; Corresponding Secretary, Miss Jessie Cooper, 30 Brunswick Avenue, Toronto; Treasurer, Miss L. L. Rogers, R.N., 10 Geofrey Street, Toronto. Directors:—Miss K. Mathieson, Riverdale Hospital, Toronto; Miss Eastwood, 206 Spadina Avenue, Toronto; Mrs. Paffard, c-r 36 Yonge Street, Toronto; Miss M. Ewing, 295 Sherbourne Street, Toronto; Miss Jean C. Wardell, R.N., 113 Delaware Avenue, Toronto; Miss Julia Stewart, 12 Selby Street, Toronto; Miss Florence Potts, Hospital for Sick Children, Toronto; Mrs. Yorke, 400 Manning Avenue, Toronto; Miss Eunice H. Dyke, R.N., 74 Homewood Avenue, Toronto; Miss Mary Gray, 505 Sherbourne Street, Toronto; Miss Janet Neilson, 295 Carlton Street, Toronto; Miss A. I. Robinson, 295 Sherbourne Street, Toronto; Miss G. L. Rowan, Grace Hospital, Toronto; Miss Janet G. McNeill, 505 Sherbourne Street, Toronto; Miss De Vellin, 505 Sherbourne Street, Toronto; Miss A. Carnochan, 566 Sherbourne Street, Toronto.

Conveners of Standing Committees—Legislation, Mrs. Paffard; Revision of Constitution and By-laws, Miss Dyke; Press and Publication, Miss Rowan. Representative to The Canadian Nurse Editorial Board, Miss E. J. Jamieson.

The regular monthly meeting of the Executive was held at the Toronto Graduate Nurses' Club, Sherbourne street, on Wednesday, November 6th. In the absence of the President, Mrs. Yorke occupied the chair. There was a fair attendance. Miss Smith, Chairman of the Hamilton Chapter, was present and gave a short account of the work mapped out for the winter. An excellent programme has been arranged, which will be both interesting and profitable.

We are glad to be able to report the organization of the second Chapter at London, Ont., with Miss Read, Second Vice-President, as its Chairman, Miss Rankin, Vice, and Miss Lyons, Secretary-Treasurer. We welcome this Chapter and wish it every success in its work.

The Florence Nightingale Post Cards are kept in stock and may be obtained at any time from Miss Ewing at the Club, 295 Sherbourne street.

There are also some Sairy Gamp Calendars for sale at twenty-five cents each. Apply to the President or to Miss Ewing.

THE ALUMNAE ASSOCIATION OF THE HAMILTON CITY HOSPITAL.

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Regular meeting first Tuesday, 8 p.m.

Miss Van Velzer has accepted a position in Dr. Hick's Hospital, Port Dover.

Miss Ada Walker has accepted a position as Assistant Superintendent of the Lady Minto Hospital, Minnedosa, Man.

Miss Betty Aitken has returned to the city to do private nursing after an extended trip to Alaska and other Western parts.

Miss Mary Aitken has returned to the city, having spent the summer with her parents near Teeswater.

Miss Kate Madden, Superintendent of Nurses, H. C. H., spent Thanksgiving in Toronto.

The Class of 1914 entertained the Graduating Class at a Masquerade Ball at the Nurses' Residence, City Hospital, October 31st, which proved a great success. The lecture room was artistically decorated with the class colors, yellow and black. The prizes were awarded to Mrs. Dr. Langrill, dressed to represent a witch, and to Miss L. Burke, dressed as a "kiltie."

Miss Scarlett and Miss Dewey have returned from the North, having spent a pleasant holiday at the former's home.

The friends of Miss Anna Kells will be pleased to hear she is improving, having recently undergone an operation at the H. C. H.

Miss Ethel Brennan has returned to the city, having spent the summer months in the West.

THE CANADIAN NURSES' ASSOCIATION AND REGISTER FOR GRADUATE NURSES, MONTREAL.

President—Miss Phillips, 43 Argyle Ave.

Vice-Presidents—Miss M. Welsh and Miss Colquhoun.

Treasurer—Miss Des Brisay, The Poinciana, Sherbrooke St. W.

Secretary—Miss Fortescue, 611 The Lindsay Bldg., St. Catherine St.

Registrar—Mrs. Burch, 175 Mansfield Street.

Reading Room—The Lindsay Bldg., Room 611, 517 St. Catherine St. West.

Lectures—From November until May, inclusive, in the Medico-Chirurgical Society Rooms, 112 Mansfield Street, first Tuesday, 8 p.m.

At the meeting on Nov. 5th, Miss Helen Des Brisay gave a most interesting account of the Pageant at the Cologne Congress.

Miss Des Brisay appeared in the costume which she had worn at the pageant. The dress was a copy of that worn by Jeanne Mance, the foundress of the Hotel Dieu, who accompanied Maisonneuve on his expedition to Canada.

The sombre black gown, with its little shoulder cape, only relieved by the apron and little skull cap, which were of white muslin, inspired both respect and confidence, but was a striking contrast to the more hygienic costume of the modern nurse.

After the reading, Miss Des Brisay gave some entertaining reminiscences of her visit to the city of Cologne and its environs.

The Child Welfare Exhibition proved most successful, the closely-crowded hall testifying to the interest taken in the movement.

A special vote of thanks, moved by Lady Allan and seconded by Mrs. W. R. Miller, was tendered to the nurses of the Association who assisted at the Maternity section. The nurses were the Misses Fraser, Hays, Mercer, O'Donnell, O'Leary, Wilson, and Miss Maude Welch, and were superintended by the President, Miss Phillips.

On Monday, Dec. 2nd, at 8 p.m., Dr. Helen MacMurchy will give a lecture on the "Mentally Deficient Child." (N.B.—Members will note that the date of this lecture is the first Monday in December, instead of the usual Tuesday.)

Canada is full of interesting places and people, and for those who are weary of the commonplace, of the monotony of the daily, weekly, yearly round, there is nothing so wholesome, nothing so beneficial, as to strike out into one of the new or secluded parts of Canada.

The Victorian Order is always coming upon such, and all of the interesting things seen and heard in the course of a year would fill a volume.

One of the most fascinating parts of Canada, a part, too, which holds within itself so many of the early beginnings of history, is the Cariboo. Let those who are seeking a real holiday, different from all other holidays, who are feeling "flat, stale and unprofitable," from any cause whatever, hie them into the Cariboo for a season and be made over. To do it aright, the holiday-seeker should arrange to arrive at Ashcroft in the small hours of the morning, thinking he is going to start at 4 a.m. (He should keep up the delusion, but, as an aside, if he get well started by 8 a.m. he will be doing well!) As he alights from the train into the night, he begins gradually to see the weird mountains and hills, showing white in the dim light, and along the roadway, huge prairie-schooners, freighters, are drawn up, awaiting the first peep of dawn, when the horses, six to ten in number, will be attached and "drag their slow length along." These freighters, with their high white tops, are part and parcel of the scenery of the Cariboo.

The journey may be made by stage or by motor, and from the moment you start until you bid a longing farewell to the Cariboo, you are entertained by all kinds of unusual things. Usually, in a load of passengers, there will be at least one who is a character, and, not infrequently, you get a whole load of them.

The scenery is different from that in any other part of the world; the grey hills and mountains, with their odd formations, the boulders along the road, with the peculiar markings, the beautiful lakes, with their lovely colorings, the dense forests, the canyons and the beauti-

fully fertile ranches in the valleys, all make the scenery so varied that there is no time to grow weary. The wild things along the road lend a charm: chickens, grouse, rabbits and bears, deer, moose and the bluest of blue birds. The road houses are very interesting, where you stop for meals or overnight. Some of them are so spotlessly clean, the meals are so good, and you feel quite at home; some are hopeless. The chauffeurs know the good ones and plan to stop at them.

And, all the time, things are passing: lumbering freighters, winding in and out among the hills, motors, horsemen, stage-coaches, herds of cattle, hundreds of head of fierce-looking beasts, Indians, Chinamen, funny-looking miniature freighters, driven by squaws, calmly smoking their pipes. So the endless chain goes on.

If the journey runs into the night, as it often does, it is most interesting to see the Indians around their camp-fires, which make a most beautiful picture, full of color, to catch a glimpse of the interior of the little homes, when the mind unconsciously weaves little romances about the inmates and one wonders if they are happy. One comes across many tragedies in that North Land. An old man came down in one of the motors. He had been up there for some 40 years. He and his wife had lived apart for 20 years, but she was very ill and was going to join him for the last lap of life's journey. He was on his way to meet her half-way, but at one of the stopping places a message was given to him, stating that his wife had passed away on her way up. As I sat by the old man, I could not help wondering what his thoughts were and the refrain kept coming to me: "Oh, the arid waste of those twenty years."

There are some bright little towns along the road: Clinton, 150 Mile, Soda Creek, from which the boats for Quesnel and Fort George leave, Quesnel and Barkerville. Quesnel, with its beautiful situation and surroundings, is a progressive little town. The hospital there, situated on the banks of the Fraser River, is in affiliation with the Victorian Order. Barkerville is the old town of the 1862 gold rush, and is very interesting. It is old and it looks the part. One longs to tarry there and study the old things. The whole country up there holds all kinds of minerals and when the railway goes in a great deal will be heard of that wonderful part of the country. One old prospector said to me: "In a few years Barkerville will be the only place on the map!" And he meant every word of it.

The little hospital, built in 1862, is to be affiliated with the Order. It will be splendid to have the railway in there, but for deep enjoyment and satisfaction, make your trip before the advent of the steel, and be sure to have at least one moonlight night on the road. The Cariboo is beautiful at any hour, at any season, and in any weather, but would you carry away with you a feeling of enchantment, of holy calm and a memory of exquisite beauty, see the Cariboo by moonlight—and live.

HOSPITALS AND NURSES.

Sister Mary Stanislaus Joseph, the chief and the sole survivor of the devoted band of Catholic Sisters of Mercy who assisted Florence Nightingale in her wonderful work of nursing during the Crimean war, recently celebrated her ninetieth birthday in the Convent of St. John and St. Elizabeth, St. John's Wood, London, England. The heroic nun has become deaf and her sight is failing, but otherwise her health and spirits are excellent.—*Catholic Register.*

Out of a class of thirty graduating nurses at the New York City Hospital, Blackwell's Island, last week, Miss Anna Kelly, of Peterboro, Ont., was, in addition to her diploma, presented with a medal for highest proficiency in her class, and also for excelling in general technical knowledge. Miss Kelly was educated at Loretto Abbey, Toronto. A number of Canadians were present at the graduating exercises who are justly proud of Miss Kelly's success.

Mis Mildred Wilson, Graduate of Toronto Western Hospital, has taken a position as Day Supervisor of the Private Wards in Grace Hospital, Detroit.

The many friends of Miss Agnes Fitzgerald will be glad to know that she is recovering from a recent operation at St. Michael's Hospital, Toronto.

Miss A. Macfarlane, late Lady Superintendent of the Vancouver General Hospital, has had to make a hurried trip east, owing to the illness of one of her sister's children. Miss Macfarlane will spend the winter at Montreal, Que.

Miss Ella MacLean, Graduate of the Toronto Western Hospital, Class '09, who has been assistant superintendent of the Home for Incurables for the past year, has taken the position of Superintendent of the Orthopedic Hospital, Bloor St., Toronto.

The regular monthly meeting of the Toronto Western Hospital Alumnae Association was held at 24 Rosebery Avenue Friday afternoon, November 1st. The president, Mrs. MacConnell, occupied the chair. The members present were reminded of the Bazaar on November 20th in aid of the Nurses' Club. Dr. Wilson gave a very instructive talk on "Danger Spots for Nurses."

The graduating exercises of Nicholls Hospital, Peterboro, Ont., were held in the Assembly Hall of the Collegiate Institute on June 18th. The graduates were: Miss Reid, Miss Mann, Miss Rosamond, Miss Telford. A reception was held afterwards at the Hospital, and a most enjoyable evening spent.

At the thirty-first monthly meeting of the Vancouver General Hospital Alumnae Association, held on Tuesday, October 2nd, at 8 p.m., the President, Miss Hart, announced that the card system had been inaugurated for the V.G.H. Register, in accordance with the decision of the last meeting of the Alumnae. Much satisfaction is anticipated from this up-to-date method. It was unanimously decided that the Alumnae should present flowers to the graduating class. When business was disposed of, a pleasant social half-hour was spent, aided by selections on the handsome Victrola belonging to the Nurses' Home.

St. John's, Newfoundland:—Miss Bowden has been appointed Assistant Nursing Superintendent in the General Hospital; Miss Redmond, Night Superintendent; Miss Cullian, X-ray Operator and Anaesthetist; Miss Powell, Matron, and Miss Caslein, Sister-in-Charge of the new Nurses' Home.

The new General Hospital, Smith's Falls, Ont., which was erected at a cost of $50,000 by the citizens, was formally opened on the afternoon of October 17th by Hon. W. T. White, Minister of Finance. Hon. A. J. Mathieson and Senator Derbyshire were among the speakers. A large gathering of interested speakers were present.

Miss Gallagher, Assistant Superintendent of the Vancouver General Hospital, has accepted the position of Lady Superintendent of the Moose Jaw Hospital, Sask. Miss Gallagher will begin her new duties on the first of November.

The members of the Vancouver Graduate Nurses' Association gave their first dance this season in Lester Hall recently. Although not a large dance, it was a very pretty, pleasant affair. There were about 185 present. The music was furnished by Harpur's Orchestra. A number of prominent ladies acted as patronesses, and the stewards were drawn from the ranks of the younger medical men. Supper was served about midnight in the supper room downstairs.

The Board of Governors of the Kingston General Hospital have found it necessary to erect a new wing (now in course of construction) to meet the pressing need for greater accommodation for patients. In order to supplement the amount subscribed, the Ladies' Aid Society was asked to raise a certain sum. The Society responded by inaugurating a fair, called "The Festival of Empire," which was successfully carried out, and the amount asked for more than realized. The Festival was held in the Armories, which presented a very pretty appearance. The booths were very prettily decorated and were well patronized. Great interest was shown by the citizens of city and township, many generous donations being received by those in charge.

The N. L. A. booth represented the Hospital, and looked very pretty decorated in the Hospital colors of red and white. The officers of the N. L. A., Mrs. Crothers, Mrs. Nickle, Mrs. Campbell, Miss Draper, were untiring in their efforts to make the booth a success. They were assisted by a number of the graduate nurses of the Alumnae. Special mention must be made of the energetic work done and lively interest taken by the nurses-in-training at the General Hospital..

The Grand March on the last night of the Festival was led by a good representation of the Nurses' Alumnae, followed by the nurses-in-training, and added much to the enthusiasm expressed by the spectators for the Hospital.

The Nurses' booth realized $373.85. The amount realized by the Festival, clear of expenses, was $11,900.00.

The twelfth annual meeting of the Nicholls Hospital Alumnae Association, Peterboro, was held in the parlors of the Y.W.C.A. on October 2nd, 1912. The former officers were re-elected, namely: President, Miss F. Dixon, 501 Water St.; 1st Vice-President, Miss M. Brown, 298 Pearl Ave.; 2nd Vice-President, Miss M. Dickrill, 141 Rubidge St.; Secretary, Miss B. Mowry, Supt. Queen Mary Hospital; Treasurer, Miss E. Davidson, 563 Park St.; The Canadian Nurse representative, Miss M. Ferguson, 476 Bon Accord St.

Two delegates were sent to the ninth annual meeting of the Graduate Nurses' Association of Ontario, held in Hamilton, May 24th.

In the absence of Miss Gordon, Miss Mowry read both reports, which were most interesting and enthusiastic.

Very pleasant memories of the discussions listened to, and the delightful entertainment given them, linger with the delegates.

During the year some changes have taken place in the Nicholls Hospital. Miss De La Mater, Superintendent, resigned, taking charge of a smaller hospital in Petrolea. She was succeeded by Miss Beamish, Assistant Superintendent, formerly in charge of the operating room in Atlantic City General Hospital. Miss May Smith, of Atlantic City General Hospital, is now the Assistant Superintendent.

Miss Cahill, Graduate of St. Michael's Hospital, Toronto, has recovered from a serious illness and left for Vancouver, B.C., to take up private nursing there.

Miss Dunn, St. Michael's Hospital Graduate, has gone home for the winter.

Miss Power, St. Michael's Hospital Graduate, has taken over the Lyndhurst Hospital, College street, Toronto. Her many friends wish her success.

Miss Gordon-Miller, St. Michael's Hospital Graduate, is recovering from an operation for appendicitis at St. Michael's Hospital.

The first meeting of the season of the St. Michael's Hospital Alumnae was held October 14th, at the home of the President, Miss Connor. Reports of the different committees were read and were very satisfactory. A record number were present. The meeting wound up with a social cup of tea. An "At Home" will be held some time in November.

A new wing is to be added to Niagara Falls, Ont., General Hospital, to cost about $30,000.

Miss Mary Layton, Matron of the Rolland Boswell Hospital, Vegreville, Alta., spent the month of October in Vancouver, B.C.

The Nurses of Guelph General Hospital Alumnae Association held their annual picnic in September. It had been postponed several times awaiting the pleasure of the "weather man," and finally had to be held indoors at the home of Mrs. A. Anderson, who is always ready to help out of a difficulty. There was a large attendance, as the members wished to honor one of their number, Mrs. Robert Hackney, who was soon to leave them and join her husband in Edmonton, Alta. The Alumnae asked Mrs. Hackney's acceptance of a dainty broach, accompanied with their good wishes and many regrets at parting with one from whom the Association had received many kindnesses.—J. E. A.

The first meeting for the season of the Alumnae Association of the Hospital for Sick Children, Toronto, was held at the Nurses' Residence on October 10th. In the absence of the President the chair was occupied by Miss Ewing. A Committee was appointed to arrange for the publishing of a revised edition of the Invalid Cook Book. A Committee was also appointed to assist Miss Hill in distributing cards for the Heather Club "Mite of Silver."

Miss McKenzie, Superintendent of the Toronto Graduate Nurses' Club, asked the members for contributions for the Bazaar to be held on November 20th. One new member was received.

The Graduating Exercises of the General Hospital, Guelph, Ont., were held in the Nurses' Residence on October 16th, when fifteen nurses received the diplomas.

Dr. Bruce Smith, Inspector of Hospitals for Ontario, gave a splendid address to the Graduating Class, after which he presented to Miss Ingles, on behalf of the Alumnae Association of the Hospital, a case of instruments for taking the highest percenatge in the examinations (91 per cent.).

Dr. Howitt administered the Hippocratic Oath and presented the diplomas. Dr. A. MacKinnon presented the badges. Addresses were also given by Rev. Mr. Fitzpatrick, Dr. Grovers, of Fergus, and ex-Mayor Nelson.

Several songs and pianoforte solos were given in a most efficient style and the whole ceremony passed off most successfully. Refresh-

ments were served by the pupil nurses, and a very enjoyable social hour spent. A pleasant feature, not on the programme, was the presentation of a most beautiful bouquet of chrysanthemums to the Lady Superintendent by the Graduating Class.

The Graduates are:—Elizabeth H. Ingles, Selkirk, Scotland; Alice L. Trusdale, Waterford, Ont.; Ethel Steele, Guelph, Ont.; Janet A. Haggart, Parry Sound, Ont.; Florence M. McEachren, Cotswold, Ont.; Grace Small, Elmira, Ont.; Hazel M. Herrlick, Woodstock, Ont.; Olive J. Griffin, Fergus, Ont.; Eva D. Grieve, Newcastle, Ont.; Ella M. Beck, Gaspe, Quebec; Annie G. Moore, Guelph, Ont.; Lillian V. Ferguson, St. Mary's, Ont.; A. Catherine Arkell, Arkell, Ont.; Mary S. Robertson, Milton, Ont.; Amy L. May, Hornby, Ont.

The new Public Hospital, Smith's Falls, Ont., was opened on Thursday, October 17th, by Hon. W. T. White, Minister of Finance. The great interest in the Hospital was manifest by the large and enthusiastic audience.

The Smith's Fall's Record says:—"The speaking was from the front balcony. The Harmony Band occupied the upper balcony and rendered excellent music during the afternoon. An enjoyable feature of the day was the luncheon given by the directors at 12.30 o'clock. It was served by the Woman's Auxiliary in a large basement room in the hospital and proved to be a decidedly pleasant affair. The opening was prefaced by devotional exercises led by Rev. Dr. Stobo, Rev. F. C. Bliss, Rev. E. W. Mackay, Rev. Mr. Boudreau, of Merrickville, and Rev. D. N. Coburn. Rev. Mr. Bliss offered the dedicatory prayer. Mr. Frank Whitcomb, President of the Board of Directors, referred briefly to the work of erecting the hospital and vocalized the feeling of pride and satisfaction that was in every heart that day on the completion of the undertaking. He spoke of the spirit of unity and enthusiasm that had characterized the enterprise, the great interest that the workingmen of the town had taken in it and of the splendid work of the ladies.

"Colonel Balderson, of Perth, was introduced, and offered his congratulations to the people of Smith's Falls on the completion of so great an undertaking. When he had finished, Dr. Stobo, the official trumpeter, called out through his trumpet that Mr. Balderson had given $1,000 for the hospital.

"Mayor Foster spoke of the growth of the town and called it the best in Canada, then he added the United States. He was glad to see Smith's Falls with so fine and commodious a place of healing. The announcement was made that he also had given one thousand dollars.

"Hon. W. T. White, Minister of Finance in the Dominion Government, gave a masterly address. He said he was delighted with the new hospital which he understood was the result of the united effort of all

the citizens and spoke of it as the people's hospital. He referred in appreciative words to the generous gift of the beautiful site by Mrs. Chambers and to all the liberal contributions they must have had to make such a building possible. He spoke of the great advance in the science of medicine and in surgery and of how much suffering we were now saved in certain cases. Hospitals, he said, were doing a great work in the world and he congratulated Smith's Falls on the generous philanthropic spirit that had made such a hospital possible. He formally declared the building opened and at the same moment Mrs. Chambers turned the key in the lock and threw open the doors.."

Other speakers were Mayor F. W. Hall, Perth; Hon. J. A. Mathieson, who had been present at the laying of the corner-stone; Dr. Bruce Smith, Toronto; Senator Taylor, Gananoque; Dr. Hanna, Perth; Mr. G. H. Frost, who, in addition to the $6,000 already given, gave an endowment of $15,000. The C. P. R. has promised $200 per year. The very generous contributions made it possible to open the hospital almost free of debt and with a substantial assured yearly income.

The Executive Committee of the Graduate Nurses' Association of British Columbia met in Victoria on November 2nd to discuss the Bill which has been prepared by the Bill Committee, and to finally pass the Constitution and By-laws.

The Victoria Nurses' Club gave a reception in the Alexander Club for the Executive.

The Vancouver Graduate Nurses' Association gave a "Cinderella Dance" in Lester Hall on Wednesday evening, October 16th. This dance has been arranged for the purpose of raising money for the Sick Nurses' Benefit Fund.

An organization which is doing a great deal in a quiet, unassuming way is the Girls' Auxiliary of the Vancouver General Hospital. It is a small organization, but its members have the best interests of the Hospital at heart, and during the year they have aided the institution financially by the sum of $1,503.71. The Annual Meeting of the Auxiliary was held in October, and the reports of the President and Treasurer show what the Auxiliary has been able to accomplish. Miss Shover, who has been President of the Auxiliary for three or four years, read a splendid report. She summed up the work of the Auxiliary as follows:

There were a variety of entertainments given by the Auxiliary during the season through each of which a very substantial sum was raised. This enabled the members to continue their work of previous years which is to make the Vancouver General one of the best equipped hospitals in Canada. The various undertakings of the members included the Annual Autumn Dance on November 24th, the sale of Red Cross Christmas seals for use on Christmas packages, a Lenten Musicale in the

THE CANADIAN SOCIETY OF SUPERINTENDENTS OF TRAINING SCHOOLS FOR NURSES.

President, Mrs H. F. M. Bowman, Berlin and Waterloo Hospital, Berlin, Ont.; First Vice-President, Miss Kate Madden, City Hospital, Hamilton; Second Vice-President, Miss C. M. Bowman, General Hospital, Portage la Prairie, Man.; Treasurer, Miss Louise C. Brent, Hospital for Sick Children, Toronto; Secretary, Miss Alice J. Scott, 11 Chicora ave., Toronto; Councillors—Miss Mina L. Rodgers, General Hospital, Niagara Falls, Ont.; Miss Mabel F. Hersey, Royal Victoria Hospital, Que.; Miss Mary A. Snively, Miss Nora Tedford, General Hospital, Montreal, Que.; Miss Robina L. Stewart, General Hospital, Toronto; Miss Ethel Johns, John McKellar Hospital, Fort William, Ont. Auditors—Miss Mina L. Rogers, General Hospital, Niagara Falls, Ont.; Miss Elizabeth G. Flaws, The Wellesley Hospital, Toronto.

ALUMNAE ASSOCIATION, GRACE HOSPITAL, TORONTO

Hon. President, Miss G. L. Rowan, Supt. of Nurses, Grace Hospital; President, Miss L. Smith, 596 Sherbourne St.; First Vice-President, Miss De Vellin; Second Vice-President, Miss P. Wood; Secretary, Miss I. Sloane, 154 Beverley St.; Assistant Secretary, Miss M. E. Henderson, 434 Markham St.; Treasurer, Miss A. Carnochan, 566 Sherbourne St.

Board of Directors—Misses E. Macpherson, Worden, Noble, Bradshaw, Cunningham and Hendricks.

Conveners of Committees—Sick Visiting, Miss Goldner, 505 Sherbourne St.; Programme, Miss Hunter, 566 Sherbourne St.; Social, Miss E. Macpherson, 392½ Markham St.; Press and Publication, Miss McKeown, 566 Sherbourne St.

Representatives on Central Registry Committee—Misses Knight and Irvine.

Representative "The Canadian Nurse"—Miss Rowan.

Regular meeting, second Tuesday, 3 p.m.

THE ALUMNAE ASSOCIATION OF THE TORONTO GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES.

President, Mrs. E. M. Feeny, 39 Grove Ave.; First Vice-President, Miss Annie I. Robinson, 295 Sherbourne St.; Second Vice-President, Miss M. E. Christie, 39 Classic Ave.; Recording Secretary, Miss J. M. Knisely, 50 Dundonald St.; Corresponding Secretary, Mrs. N. Hillary Aubin, 78 Queen's Park; Treasurer, Miss Clara Evans, 130 Dunn Ave.

Directors—Misses E. Field, P. M. Green, Pearl Allen.

Conveners of Committees—Sick Visiting, Miss M. A. B. Ellis, General Hospital; Social and Look-Out, Mrs. A. G. Findlay, 649 Church St.; Registration, Miss Bella Crosby, 41 Rose Ave.; Programme, Miss Janet Neilson, 295 Carlton St.

Representatives on Central Registry Committee—Miss W. Ferguson, Miss C. A. Mitchell.

Representative "The Canadian Nurse"—Miss Lennox, 107 Bedford Rd.

Regular meeting, First Friday, 3.30 p.m.

THE ALUMNAE ASSOCIATION OF ST. MICHAEL'S HOSPITAL TORONTO.

President, Miss Connor, 853 Bathurst St.; First Vice-President, Miss O'Connor, St. Michael's Hospital; Second Vice-President, Miss McBride, 518 Markham St.; Secretary, Miss O'Meara, 596 Sherbourne St.; Treasurer, Miss Thompson, 596 Sherbourne St.

Board of Directors—Miss Isabel O'Connor, 596 Sherbourne St.; Miss Crowley, 853 Bathurst St.; Miss O'Brien, 570 Sherbourne St.

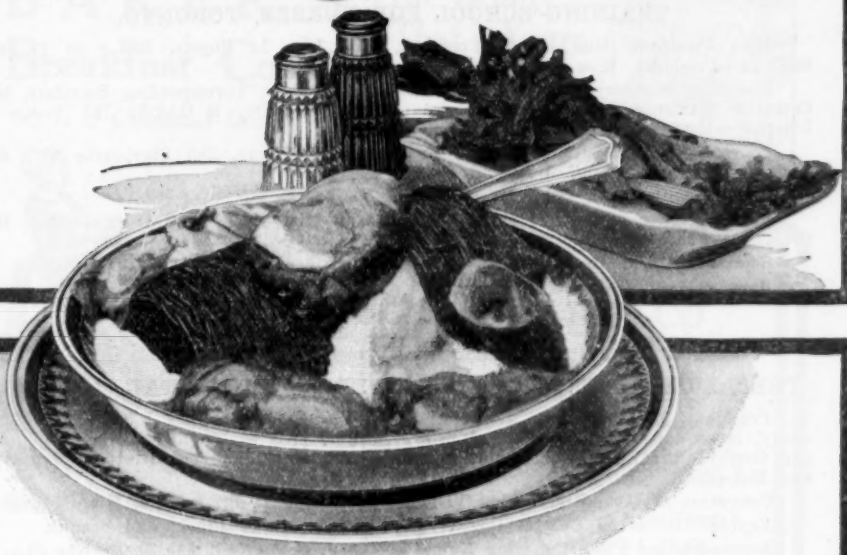
Representatives on Central Registry Committee—Miss Boyle, 362 Euclid Ave.; Miss Rowan, 596 Sherbourne St.

Representative "The Canadian Nurse"—Miss Stubberfield, 13 Spencer Ave.

Secretary-Treasurer Sick Benefit Fund—Miss O'Connor, St. Michael's Hospital.

Regular meeting, second Monday, 3 p.m.

Cutting the Cost



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For dinner nothing so wholesome and nourishing as creamed oysters with Shredded Wheat. Heat the Biscuit in the oven to restore crispness; crush in the top with the bowl of a spoon and fill with creamed oysters and season to suit the taste.

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Hon. President, Miss Brent; President, Miss Lina L. Rogers, R.N., 10 Geoffrey St.; Vice-President, Miss Teeter, 498 Dovercourt Road.

Recording Secretary, Miss Hill, 105 Roxboro St. East; Corresponding Secretary, Miss Catharine Cameron, 207 St. Clarens Ave.; Treasurer, Mrs. H Caniff, 755 Yonge St. Directors—Misses Panton, Charters, Winter, O'Hara.

Conveners of Committees—General Business, Miss Ewing, 295 Sherbourne St.; Sick Visiting, Miss G. Gowans, 5 Dupont St.

Press Representative—Miss M. Gray, 505 Sherbourne St.

Representatives on Central Registry Committee—Miss McCuaig, 7 Bernard Ave.; Miss Gray, 505 Sherbourne St.

Representative, "The Canadian Nurse"—Miss G. A. Gowans, 5 Dupont St.

Regular Meeting—Second Thursday, 3.30 p.m.

THE ALUMNAE ASSOCIATION, RIVERDALE HOSPITAL, TORONTO.

President, Miss Mathieson, Superintendent; Vice-President, Miss J. G. McNeill; Secretary, Miss Annie Day, 86 Maitland St.; Treasurer, Miss M. Fogarty, corner Pape Ave. and Gerrard St.; Executive Committee, Misses Hallett, McFadyen, Stretton, Mannering and McLellan.

Conveners of Committees—Sick Visiting, Miss Hallett; Programme, Miss McFadyen.

Representatives on Central Registry Committee—Misses Pigott and Semple.

Representative "The Canadian Nurse"—Miss J. G. McNeill, 505 Sherbourne St.

Regular Meetings—First Thursday, 8 p.m.

THE FLORENCE NIGHTINGALE ASSOCIATION OF TORONTO.

Honorary President, Miss M. J. Kennedy, 1189 Yates St., Victoria, B.C.; President, Miss M. A. McKenzie, R.N., 295 Sherbourne St.; Vice-President, Miss M. Urquhart, 64 Howard St.; Secretary-Treasurer, Miss J. C. Wardell, R.N., 113 Delaware Ave.

Board of Directors—Misses Pringle, VanEvery, R.N.; Hunter, Hoyt, Hehu, Mrs. Valentine, and Mrs. Wigham.

Convener Social Committee—Miss McKenzie.

Representatives the Central Registry—Misses McKenzie and Pringle.

The Canadian Nurse Representative—Miss VanEvery, R.N., 116 Fermanagh Ave.

Regular meeting, first Tuesday.

THE TORONTO WESTERN HOSPITAL ALUMNAE ASSOCIATION.

Hon. President, Miss Bell, Lady Superintendent; President, Mrs. MacConnell, 125 Major St.; First Vice-President, Miss Cooper, 30 Brunswick Ave.; Second Vice-President, Miss Kelly; Recording Secretary, Miss Moore; Corresponding Secretary, Miss L. Bowling, 77 Winchester St.; Treasurer, Miss Mary Anderson, 48 Wilson Ave.

Visiting Committee—Mrs. Coady, Miss Cooney.

Registry Committee—Miss Anderson, Miss Baker.

Board of Directors—Miss Davis; Mrs. Yorke, 400 Manning Ave.; Miss Cooper, 30 Brunswick Ave.

Programme Committee—Misses Fee, Moore and McDermid.

The Canadian Nurse—Miss M. Butchart.

Regular meeting, first Friday, 3.30 p.m.

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Tea Rooms at the Horse Show Building during the Annual Horse Show in April, and the Annual Mayflower Dance on May 3rd.

Besides the efforts for financial aid, the girls endeavored to give some personal pleasure to the patients through the entertainments which it is their custom to hold at the Hospital on Christmas Eve and again on Easter Eve, and by providing books and magazines for each of the wards.

With the funds at their disposal the Auxiliary purchased during the season a number of important additions to the Hospital equipment. In December the order was given for six ward dressing carriages, one improved wheel stretcher, one wheel chair, an electric headlight which is very essential at some times in the operating room, an operating table of the latest improved type. The operating table purchased by the Auxiliary three years ago is in perfect condition, but the increase in the amount of surgical work done at the hospital makes it necessary to have both operating rooms fitted with most modern equipment. The demand upon these rooms has become so great during the last few months that, at the meeting in September, it was voted to purchase a third table, a duplicate of the one bought in December. In February the Auxiliary ordered another patent bed for placing patients in the Fowler position. Four of these have already been purchased by the Auxiliary and found very satisfactory. In March a bookcase of three sections was placed in Ward G. At the last meeting of the season, it was voted to purchase, besides the operating table already mentioned, three sterlizing oufits for three of the surgical wards, and another wheel stretcher or patient's carriage.

Probably one of the steps taken by the Auxiliary that will be interesting to the general public is the establishing of a telephone information bureau at the hospital. At the recent investigation, the complaint was made of insufficient and incorrect answers to inquiries as to the condition of patients in the hospital. The only way to overcome this difficulty is to employ a competent person, whose duty shall be to have the complete list of patients, to keep informed during the day as to their condition and to be able to answer intelligently all inquiries made by friends. The Girls' Auxiliary purpose financing this information bureau until such time as the Board of Directors can see their way clear to add the expense to their regular list.

The Federal Government of Australia now provides a maternity grant of $25.00 for each child born and registered in the Commonwealth.

The corner-stone of the Empire Wing of the General Hospital, Kingston, Ont., erected at a cost of $40,000 by the people of Kingston and district, was laid recently by B. W. Robertson, a Governor of the institution for the past thirty years. Addresses were delivered by Hon.

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W. H. Hearst, Dr. A. E. Ross, M.P.P.; Mayor Hoag, J. A. Minnes, Lieut.-Col. Duff, F. G. Lockett, Chairman of the Governing Board, and others.

An addition, to cost $25,000, is being built in the rear of the Hospital for Sick Children, Toronto. The building will be two storeys and of brick.

Thirty-one thousand dollars has been raised by the Town of Cochrane, Ont., towards a $50,000 hospital, which will be erected some time within the next year. Mayor Carter has been in Toronto and has arranged to have the hospital funds and the equipment promised to Porcupine come to Cochrane. This includes $20,000 in money, equipment valued at $10,000, and about $1,000 raised by subscription by Mayor Carter in Toronto. In addition to this the Timiskaming and Northern Ontario Railway has given a site at the north end of the town extremely suitable for a hospital.

Immediately upon the close of the Annual Meeting of the General Hospital, Sarnia, Ont., the ceremonies in connection with the graduation of the nurses were proceeded with. The class for this year is:—Miss Annie M. Tuckley, Stratford; Miss Estelle Morelock, New Hamburg; Miss Margaret Marshall, Barrie; Miss Sarah Catharine Brown, New Monkton; Miss Ettie May Element, London.

Rev. J. R. Hall opened the ceremonies with prayer after which the Alexandra Orchestra played a selection.

Dr. Maclean then administered the Florence Nightingale Oath to the Graduates.

Mayor John McGibbon presented each Graduate with her diploma and her gratuity of $20 in Canadian gold coins.

Miss M. Mackenzie pinned on each Graduate her medal and pin.

Mrs. Laughlin rendered a beautiful solo, and A. W. Mills and A. L. Parsons sang a duet that was much appreciated.

Bouquets were presented to the nurses by little Miss Margaret Mackenzie and little Miss Eileen Cook.

Rev. W. H. Barraclough made the speech of the evening in his address to the Graduates. It is to be hoped that the fatherly and kindly advice he gave to them will be long remembered and acted upon.

Dr. McDonald addressed the nurses with a few practical remarks, and then strongly advocated a Nurses' Home, giving conclusive reasons for such an addition to the hospital. After his address the nurses presented him with bouquets of roses.

Dr. Maclean spoke of the necessity of an isolation ward or wards for contagious cases.

The National Anthem was then played by the orchestra and sung by the entire audience, and the meeting adjourned.

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Antiphlogistine should be applied thick and hot and well protected by suitable covering.

H. R. H. the Duchess of Connaught has written to the school children of Vancouver, thanking them for their generous act in contributing to the Victorian Order of Nurses. "At some future time in your lives," said Her Royal Highness, "you may be glad to have these nurses near you to look fter yourselves or your families. You will then be able to remember that by this charitable act in your early youth you helped me personally in my effort to enlarge the field of usefulness of this order of nurses."

MARRIAGES.

Thompson-Ward—At Wardsville, Ont., on October 9th, Miss Margaret Ward, Graduate of Toronto Western Hospital, Class '08, to Mr Oscar Thompson, of Trenton, Ont.

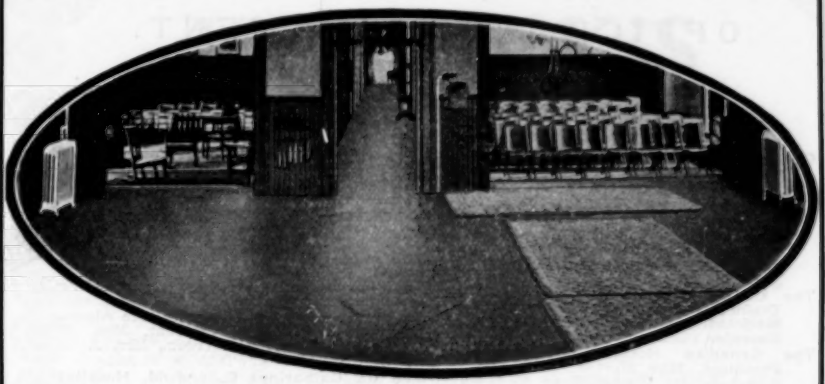
Sauder-Brandon—On September 19th, 1912, at Cannington, Miss Alice Louise Brandon, Graduate of St. Michael's Hospital, Class '09, to Mr. Melvin Sauder, of Vancouver, B.C. Mr. and Mrs. Sauder will be at home after October 1st at 2243 6th Ave. East, Vancouver.

Davidson-Motherwell—At St. Mary's Church, Sorrento, B.C., on October 17th, Miss Mary Motherwell, who has been in charge of the Mission Hospitals at Van Anda and Alert Bay, to Campbell Davidson, M.D., son of Hon. C. C. Davidson, Chief Justice of the Superior Court, Montreal.

Woodside-Cade—On November 5th, at Cowan Ave., Toronto, Miss Florence Lillian Cade, Graduate of City Hospital, Youngstown, Ohio, Class '05, and late Superintendent of the General Hospital, Port Arthur, Ont., to Mr. James Hartley Woodside, of Port Arthur.

BIRTH.

Lane—At the Englehart Private Hospital, West Toronto, on October 26th, to Rev. D. and Mrs. Lane, of Cookstown, Ont., a daughter. Mrs. Lane (nee Huck) is a Graduate of Toronto Western Hospital, Class '09.



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The Canadian National Association of Trained Nurses. — President, Miss Mackenzie, Ottawa; Secretary, Mrs. Fournier, Gravenhurst, Ont.

The Canadian Hospital Association.—President, Miss Morton, Collingwood; Secretary, Dr. Pobbie, Supt. Tuberculosis Hospital, Weston.

The Canadian Nurses' Association, Montreal—President, Miss Phillips; Cor. Secretary, Miss Fortescue, 611 The Lindsay Bldg., St. Catherine St.

The Nova Scotia Graduate Nurses' Association.—President, Miss Pemberton, "Restholm," Halifax; Secretary Miss Kirke, Supt. Victoria General Hospital, Halifax.

The Graduate Nurses' Association of Ontario.—President, Miss Bella Crosby; Rec. Sec., Miss I. F. Pringle, 188 Avenue Rd., Toronto.

The Victorian Order of Nurses.—Miss Mackenzie Chief Superintendent, 578 Somerset St., Ottawa.

The Guild of St. Barnabas for Nurses.

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The Toronto Hospital for Sick Children Alumnae Association.—President, Miss L. L. Rodgers; Cor. Sec., Miss C. Cameron, 207 St. Clarens Ave.

The Toronto Riverdale Isolation Hospital Alumnae Association. — President, Miss Mathieson; Secretary, Miss Annie Day, 86 Maitland St.

The Toronto St. Michael's Hospital Alumnae Association.—President, Miss Connor; Secretary, Miss O'Meara, 596 Sherbourne St.

The Toronto Western Hospital Alumnae Association—President, Mrs. MacConnell; Cor. Sec., Miss Lucy Bowling, 77 Winchester St.

The Winnipeg General Hospital Alumnae Association. — President, Miss Hood; Secretary, Miss M. F. Gray, General Hospital.

The Vancouver Graduate Nurses' Association.—President, Miss Hall; Secretary, Miss Ruth Judge, 811 Thurlow St.

The Vancouer General Hospital Alumnae Association.—President, Miss J. G. Hart; Secretary, Miss M. Wilson, 675 Twelfth Ave. W.

The Victoria Trained Nurses' Club—President, Miss G. H. Jones; Secretary, Miss H. G. Turner.

The Florence Nightingale Association, Toronto.—President, Miss M. A. McKenzie; Secretary, Miss J. C. Wardell, 113 Delaware Ave.

Nicholl's Hospital Alumnae Association, Peterboro. — President, Miss Dixon; Secretary, Miss B. Mowry, Supt. Queen Mary Hospital.

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Superintendent of Hospital and Nurses—Sisters of Charity.
Number of beds—One hundred.
Graduate Nurses on Staff—Ten.
Pupil Nurses—Twenty-two.
Term of Training—Two and a half years.
Branches of Training—Medical, Surgical, Obstetrical.

Hospital—Royal Alexandra, Edmonton.
Established—1900. Registered—Edmonton, 1900.
Superintendent of Hospital and Nurses—H. B. Tairservice.
Number of beds—One hundred and twenty-two.
Graduate Nurses on Staff—Eight.
Pupil Nurses—Forty-four.
Term of Training—Three years.
Branches of Training—Medical, Surgical, Obstetrical.

Hospital—Isolation, Edmonton.
Established—1907. Registered—Edmonton, 1907.
Superintendent of Hospital—Dr. T. H. Whitelaw.
Superintendent of Nurses—J. Macdonald.
Number of beds—Sixty.
Graduate Nurses on Staff—Five.
Pupil Nurses—Three.
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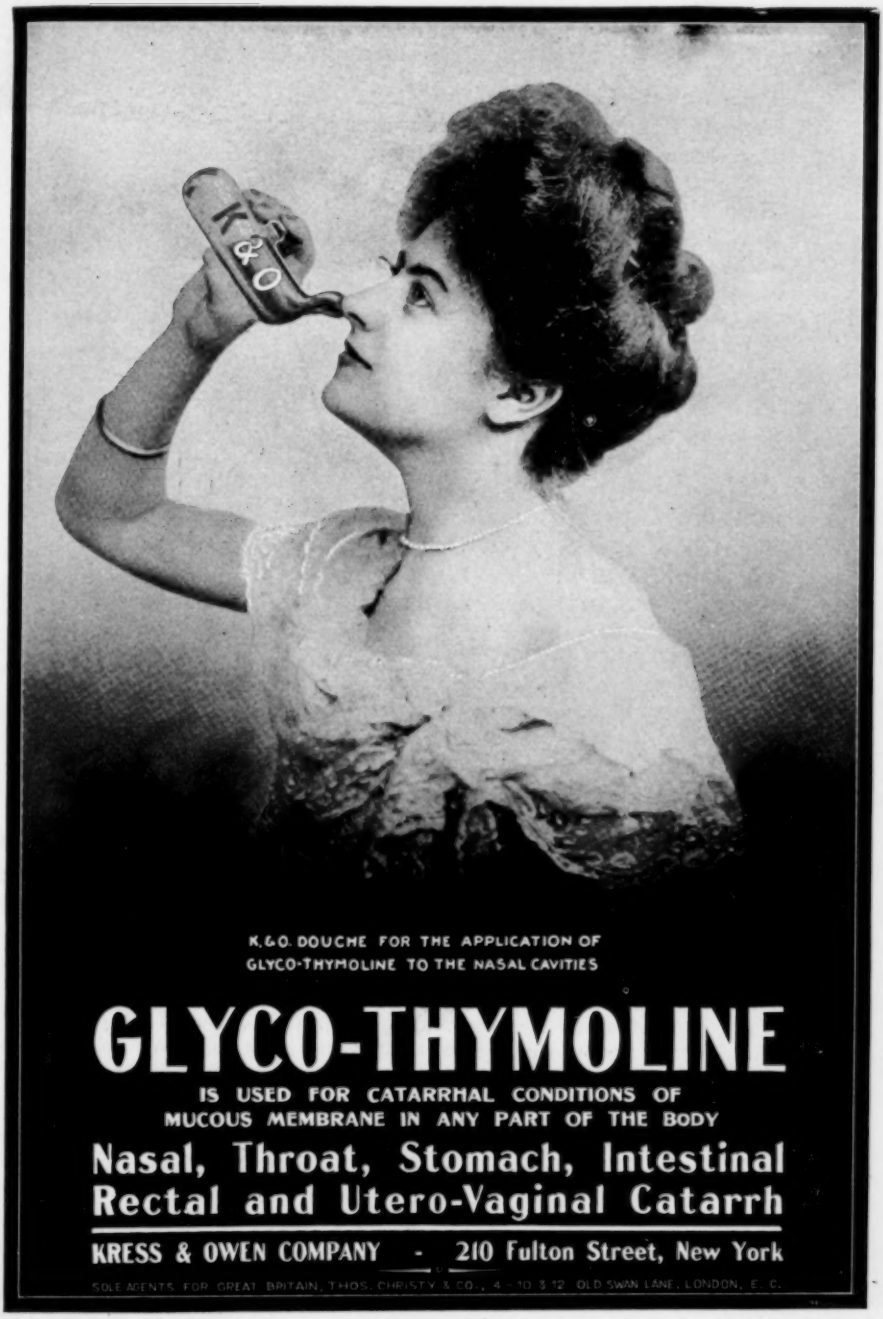

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Branches of Training—All.

Hospital—The General, Medicine Hat.
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Superintendent of Hospital—Dr. C. E. Smith.
Superintendent of Nurses—Victoria Winslow.
Number of beds—One hundred and ten.
Graduate Nurses on Staff—Five.
Pupil Nurses—Twenty-five.
Term of Training—Three years.
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